| Effective January 1, 2003 50 277 -22 98 10 16 43629   |                               |                            |                |                        |           |                     | 8<br>13629             | 12.11.67   |
|---|-------------------------------|----------------------------|----------------|------------------------|-----------|---------------------|------------------------|------------|
| CLAIMS AS FILED - PART ( (Column 1) (Column 2)  |                               |                            |                | ENTITY                 | OR        | OTHER               | THAN                   | Co-11-02   |
| TOTAL CLAIMS  |                               |                            | TYPE'          | FEE                    | 1         | RATE                | FEE                    |            |
| FOR   | MANBER FILED                  | NUMBER EXTRA               | BASIC          |                        | OR        | BASIC FEE           | 750.00                 |            |
| TOTAL CHARGEABLE CLAIMS   | 20 minus 20=                  | • 0                        | X3 9           |                        | 1         | X\$18=              |                        |            |
| INDEPENDENT CLAIMS  | ?_ minus 3 =                  | • 0                        | X42            | <del></del>            | OR        |                     | 0                      |            |
| MULTIPLE DEPENDENT CLAIM PRESENT  |                               |                            |                | <del>-   · · -</del>   | OR        | X84=                | 0                      |            |
| .* If the difference in column 1 is tess than zero, enter "0" in column 2   |                               | +140                       | <del>-  </del> | OR                     | +280=     | 0                   |                        |            |
| 10 643 629 CLAIMS AS AMENDED - PART II  |                               |                            | TOTA           | <u> ا</u>              | QR.       | TOTAL               | 750                    | <u>)</u> [ |
|   |                               | 100                        | SMAI           | LENTITY                | <b>QA</b> | SMALL:              |                        | $\bigcirc$ |
| WE CLAIMS REMARKING AFTER AMENDMENT  Total • 20  Independent • 2  | HIGH<br>NUM<br>PREVI<br>PAID  | BER PRESENT DUSLY EXTRA    | RATI           | ADDI-<br>TIONAL<br>FEE |           | RATE:               | ADDI-<br>TIONAL<br>FEE | 6          |
| Total • 20  | Minus 2                       | Ø -                        | X\$ 9          | 9                      | OR        | X\$18=              |                        |            |
| independent   | Minus and                     | 3 -                        | X42            |                        | OR        | X84=                |                        | 36         |
| FIRST PRESENTATION OF M   | IULTIPLE DEPENDENT            | CAIN []                    | +140           |                        | OR        | +280=               |                        | 20         |
| India   | ::                            |                            | 701            |                        | OR        | TOTAL               |                        | 9          |
| 7/01/06 (Column 1)  | (Colu                         | mn 2) (Column 3)           | ADDIT. F       | EE                     |           | ADDIT. FEE          |                        |            |
| CLAIMS REMAINING AFTERN AMENOMENT Total Independent   | HIGH<br>NUM<br>PREVI<br>PAID  | BER PRESENT<br>OUSLY EXTRA | RATE           | ADDI-<br>TIONAL<br>FEE |           | RATE ·              | ADDI-<br>TIONAL<br>FEE |            |
| Total • V/  | /M/ <del>/</del> -            | a '                        | X\$ 9          |                        | OЯ        | X\$18=              |                        |            |
| tridependent • FIRST PRESENTATION OF M  | ULTIPLE DEPENDENT             | CLAIM [7]                  | X42            |                        | OR        | X84=                |                        |            |
|   |                               |                            | +140           | •                      | OR        | +280=               |                        |            |
| 10-20.06  |                               |                            | ADDIT, F       |                        | OR        | TOTAL<br>ADDIT, FEE |                        |            |
| (Column 1)  | (Colu                         |                            | Ç              |                        | -         |                     | •                      |            |
| CLAIMS REMAINING AFTER AMENDMENT  | HIGH<br>NUM<br>PRIEVY<br>PAID | BER PRESENT<br>OUSLY EXTRA | RATE           | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |            |
| Total . 20  | Winnia C                      | 0                          | X 9            | -                      | OR        | X\$18=              |                        |            |
| Independent   | Mirats ese                    | 3 -                        | X424           | -                      | OR        | X84=                |                        |            |
| FIRST PRESENTATION OF A   | NULTIPLE DEPENDENT            | TCLAIM                     | 1              |                        |           |                     |                        |            |
| * If the entry in column 1 is less than   | the entry in column 2, with   | "O" in column 3.           | +140           |                        | OR        | +280=               |                        |            |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                               |                            |                |                        |           |                     |                        |            |

Application or Docket Number